

**Dane Town Hall Meeting Workgroup
Minutes 9/20/05**

Present: Kathy Kaelin, AHSI, Tim Otis, Mental Health Center of Dane County (MHCDC), Mary Olen, Community Living Alliance Inc.(CLA)/The Management Group (TMG), Fran Genter, Dane Co. DHS, Michael Fox, DHFS/BMHCP, Todd Costello, CLA, Peg Algar, DHFS/BMHCP

Excused: Peggy Michaelis (MHCDC), Jeff Erlanger, Wendy Warren DHFS/DDES, David Sievert, CLA/TMG

I. The 1915(b) Waiver Application for the Dane SSI MC Program has not been approved, and is unlikely to be approved as a mandatory one plan only program.

- CMS has suggested some alternative ways to structure the Dane SSI MC Program:
 - a)* Make the program voluntary, in which individuals have a choice to enroll or not; i.e., a choice of Fee-For Service (FFS) or Managed Care (MC). Those who do not choose would be auto-assigned;
 - b)* Apply for Section 1115 waiver authority which provides greater flexibility and waivers might be granted to allow Wisconsin to operate the program in accordance with the original design; or
 - c)* Designate Community Living Alliance as a PIHP or a PAHP and operate the program in accordance with the original design.
- The Department is considering the first option to make the program voluntary. This would be similar to the approach used with iCARE, however an important difference would be the lock-in aspect for the Dane program. The following features would be included in the new design:
 - All SSI recipients that are part of the original target population will be invited to participate in the Dane SSI MC Program on a voluntary basis.
 - Enrollees will be given approximately 6 weeks to choose between FFS and MC. If they make no choice, they will be auto-assigned to MC.

- After enrollment into MC, enrollees will have an additional 90 days to opt-out of the program.
- After the 90-day opt-out period (after enrollment), if enrollees do not choose to go back to FFS, they will be locked into MC up to 12 months.
- After the lock-in period in MC, the enrollee will have the option to go back to FFS.
- Dual eligibles (Medicare/Medicaid) will remain voluntary enrollees and may switch back to FFS at any time.
- The intake process will still utilize AHSI as the enrollment broker.
- Rates will remain the same.
- In the future, it would be possible to add the choice of additional MCOs and use a mandatory enrollment structure.

II. Changes That will Need to be Made to Enrollment Materials/Processes to Accommodate New Program Design

- The Town Hall Meeting PowerPoint presentation will need to be modified to reflect the changes described above.
- The Town Hall Meetings will need to be rescheduled.
- The EDS and operations timeline will need to be adjusted to accommodate the changes.
- The implementation date of the program may be delayed.
- The enrollment booklet will need to be changed and all of the enrollment materials and overlays will need to be edited.
- The Medicaid Contract will need to be revised.
- The readiness review process will stay the same.

III. Progress on Town Hall Meeting Preparation

- Cable city channel 12 has agreed to broadcast a taping of the first Town Hall Meeting multiple times.

- Division staff will make sure that the PowerPoint presentation is translated into Hmong, Spanish and Russian.
- Other communication venues that division staff will investigate include: teleconferencing and making the PowerPoint presentation available on CD ROM and the DHFS Web site.
- The county is waiting to hear back from the Alliance Center caterer to see if we can obtain a discount on refreshments for the Town Hall Meetings.

IV. Next Steps

- Division staff will work on the changes to enrollment materials and the PowerPoint presentation.
- The next Town Hall Meeting Workgroup will be scheduled as soon as we obtain more information and direction from management regarding the restructuring of the program.